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CONFIRMATION NO. 2722

|  |   |                               |   |                                      |
|--|---|-------------------------------|---|--------------------------------------|
| <b>SERIAL NUMBER</b><br>10/573,363   | <b>FILING OR 371(c) DATE</b><br>03/24/2006<br><b>RULE</b>   | <b>CLASS</b><br>514           | <b>GROUP ART UNIT</b><br>1624   | <b>ATTORNEY DOCKET NO.</b><br>21587P |
| <b>APPLICANTS</b><br>Tesfaye Biftu, Westfield, NJ;<br>Matthew J. Wyvratt, Mountainside, NJ;<br>Michael H. Fisher, Ringoes, NJ, Deceased;<br>Louis L. Zuegner III, Flemington, NJ, Legal Representative;  |   |                               |   |                                      |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US04/40617 12/06/2004<br>which claims benefit of 60/528,570 12/10/2003   |   |                               |   |                                      |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |                                      |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/15/2006</b>   |   |                               |   |                                      |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> |   | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b><br>0  | <b>TOTAL CLAIMS</b><br>55            |
| <b>INDEPENDENT CLAIMS</b><br>2   |   |                               |   |                                      |
| <b>ADDRESS</b><br>210  |   |                               |   |                                      |
| <b>TITLE</b><br>ANTIPROTOZOAL IMIDAZOPYRIDINE COMPOUNDS  |   |                               |   |                                      |
| <b>FILING FEE RECEIVED</b><br>2150   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |

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